To the Chairs, Vice Chairs, Ranking Member, and Education Committee Members,

My name is Erin Spaulding and I am the proud mother of two children with life-threatening food allergies who attend middle school in Branford. I am writing in support of **HB 5452** as I was not able to attend the public hearing. Last year, I testified in front of the committee as the Co-Chair and Parent Advocate of the Task Force to Study Life-Threatening Food Allergies in Schools. The Task Force did extensive research into food allergy safety in schools, including transportation, and issued a thorough report with its recommendations. Some of the Task Force recommendations are included in HB 5452.

My advocacy as a parent began in 2009 when my severely allergic daughter started attending school. As a result of working collaboratively with the Superintendent of Schools and Board of Education in 2012, the school district's food allergy policies strengthened, and Branford became one of the few districts in Connecticut requiring transportation personnel to be trained in the administration of epinephrine.

I have read the public testimony submitted by COSTA, and met them last year when they presented to The Task Force and later testified at the public hearing. I agree with the points they make about safely transporting school children being their top priority. I agree that the challenges these highly-trained drivers face, such as distracted drivers, behavior on the bus, high seat backs further limiting their view of the bus, are indeed challenges. However, the current emergency protocol of pulling the bus to the side of the road and using the radio to call dispatch to call 911, **does not do enough** to protect a child experiencing a medical emergency, such as anaphylaxis, on the bus. Drivers need to be trained to know the signs of anaphylaxis and to administer epinephrine to an identified child who has a doctor's note to self-carry his/her epinephrine. **Sitting and waiting for help to arrive puts a child's life at risk.**

In Branford, and in many other towns around Connecticut, there are "dead zones" where the radios do not work or come in choppy. A driver's personal cell phone, which could be used as back up if the radio is not clear, may or may not work in the dead zone, depending on what cell phone carrier they have and which tower they happen to be near. My daughter has experienced anaphylaxis many times and within 5 minutes her throat closes and she cannot breathe. A driver attempting to connect through a dead zone, or even clearly with dispatch who takes an extra step to call 911, **is wasting valuable time that a child whose throat is rapidly closing does not have**. Additionally, they may be in too much distress to self-administer the epinephrine that they carry with them themselves.

I am not a doctor or a nurse. I am a mom who was handed a prescription and a video to watch on how to use an epi-pen when my daughter was diagnosed. Every other school personnel...from paraprofessionals to coaches...who interface with children during their school day, is trained to administer epinephrine. Transportation is part of the school day,

and therefore transportation personnel need to be included in this training. I give epinephrine immediately, and THEN I call 911. **Minutes...seconds...matter when administering this life-saving medication.** The new emergency protocol of transportation companies needs to include this training. The additional step should now be to administer the medication after securing the bus on the side of the road and THEN call for 911.

I do not agree that school nurses should provide this training to transportation personnel. Using Branford as an example of how to implement this training, the bus company, First Student, includes the training in their existing modules. There is no fiscal responsibility as the online training produced by FARE is FREE and the Fire Department/Paramedics conducts the training annually on the signs and symptoms of anaphylaxis, and how to administer epinephrine. For new hires after the annual in-person training, they watch the online training.

As a former Task Force member, I know through a survey we conducted that there are a few districts around Connecticut who are electing to train their drivers. I am lucky that my children, now 11 and 13, live in Branford where our drivers are trained to respond in case of emergency. If they were at the public hearing and not in school, they would tell you first hand that they feel safe and included on the bus now. Driver training should not be elective, but **required** for the health and safety of all food allergic children across the state, regardless of the district in which they live.

Thank you for your continued work on this bill.

Erin Spaulding

Branford, CT